

Suicide Attempt Morbidity – Data Brief

Vermont Injury Prevention Program

Background

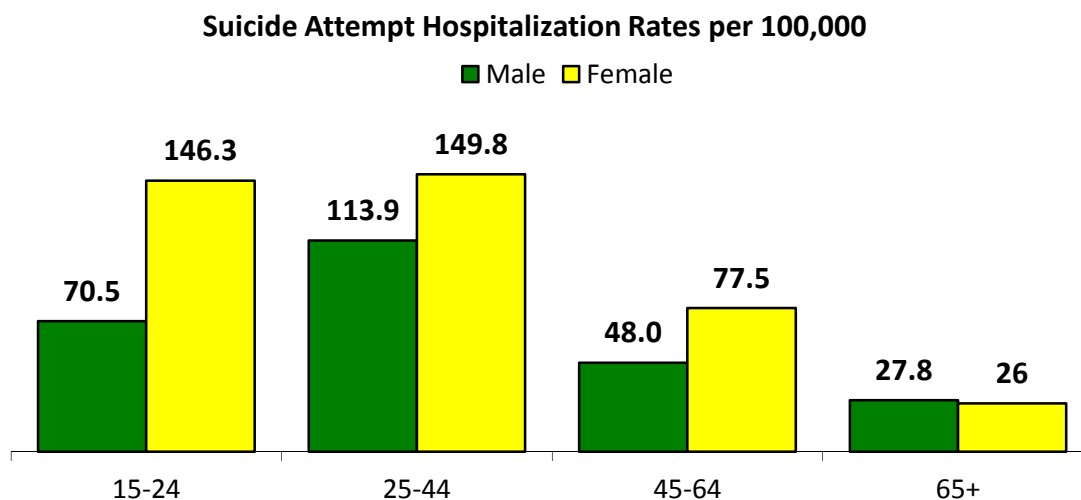
Suicidal ideation is defined as suicidal thinking. It can range from a vague wish to die to actively making a suicide plan. A suicide attempt is an action taken by a person with the intent that the action will result in his or her death. The risk factors for suicidal ideation and suicide attempts are similar to those for suicide: depression and other mental health diagnoses or a substance-abuse disorder, often in combination with a mental disorder. Other risk factors include: prior suicide attempt; firearms in the home; exposure to suicidal behavior, and a family history of suicide, mental disorders or substance abuse and family violence.¹

Hospitalization for Suicide Attempt

In 2009 there were 441 hospitalizations for attempted suicide in Vermont. This is a hospitalization rate of 72.7 per 100,000 persons. Over the past 10-year period (from 1999 to 2009) the suicide hospitalization rate rose from 59.6 per 100,000 to a peak of 76.1 in 2004. Since then, the suicide rate has leveled to its current rate.

Women are one and a half times more likely to be hospitalized for a suicide attempt. In 2009 there were 267 women hospitalized for a suicide attempt compared to 174 men. Correspondingly, Vermont's suicide attempt hospitalization rate is significantly higher among women than men (87.0 versus 58.6 per 100,000, respectively).

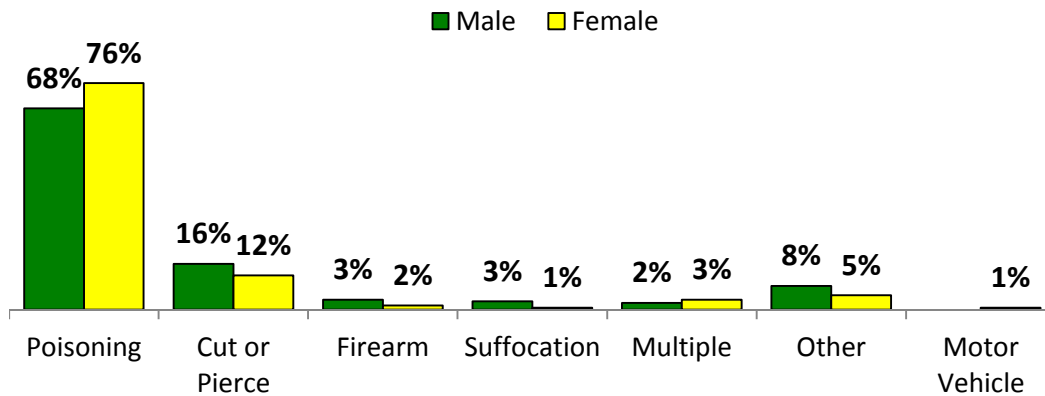
The highest rates of suicide attempt hospitalization generally occur among those younger than 45. In the 45 to 64 year old age group the suicide attempt hospitalization rate declines by about half and it declines even further among the 65 and older age group. Although women have a higher rate of suicide attempt hospitalization in nearly every age group, among both men and women 65 and older, the rate of suicide attempt hospitalization is very similar.



The leading cause of hospitalization for attempted suicide is poisoning. More than two-thirds of male hospitalizations and three-quarters of female hospitalizations (for self-harm) are caused by poisoning. Cut or pierce is the next most common cause, around one in seven hospitalizations for attempted suicide. There are very few hospitalizations due to suicide attempts by firearm, suffocation, motor vehicle or multiple mechanisms.

¹ Mann, J.J. (2002). *A Current Perspective of Suicide and Attempted Suicide*. *Annals of Internal Medicine* 136: 302-311.

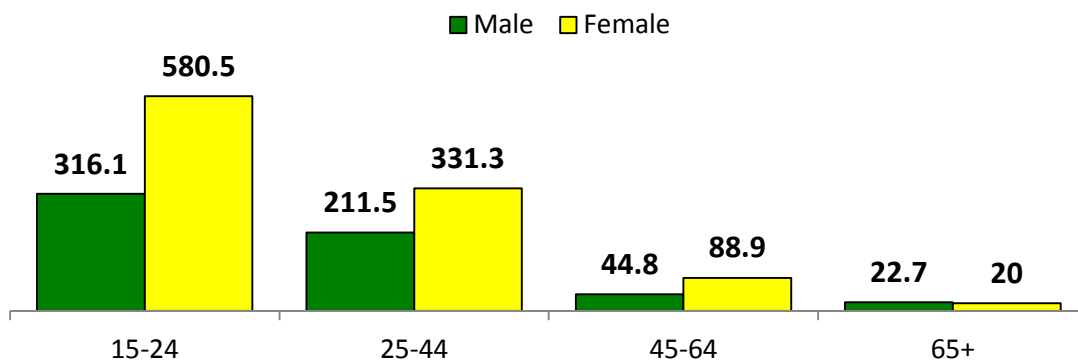
Cause of Suicide Attempt Hospitalization



Suicide Attempt Emergency Department Visits

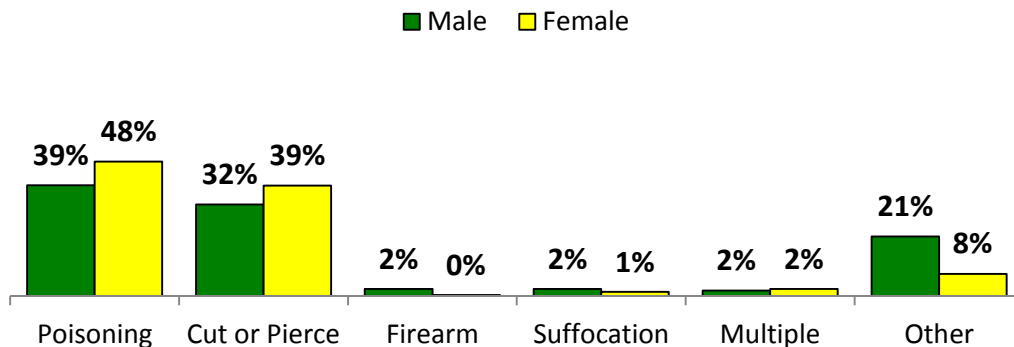
There were 1,007 emergency department visits due to suicide attempt in 2009. This is a rate of 171.2 ED visits per 100,000 persons. This rate has been incrementally increasing since 2003, when the rate was 136.8 per 100,000. As with hospitalizations, women are more likely to have an ED visit than men – in 2009 there were 637 female visits to the ED, compared to 370 male visits. Correspondingly, women's ED visit rate for suicide attempt was significantly higher than men's (217.8 versus 125.4 per 100,000). Higher ED visit rates for self-harm also occur among younger Vermonters, with the rate decreasing significantly with age.

Suicide Attempt Emergency Department Visit Rate per 100,000



As with hospitalizations, the leading causes of self-injury ED visits are poisoning and cut or pierce injury – taken together these two causes account for a large majority of self-harm ED visits. Very few self-harm ED visits are due to firearms, suffocation or multiple causes.

Cause of Suicide ED Visits



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